

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 National Rifle Association of America Political Victory Fund

ADDRESS (number and street) 11250 Waples Mill Road Check if different than previously reported. (ACC) Fairfax VA 22030

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00053553 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 01 / 01 / 2019 through 01 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Owens, G, , Robert, Type or Print Name of Treasurer

Signature of Treasurer Owens, G, , Robert, [Electronically Filed] Date 02 / 20 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		1784857.51
(b) Cash on Hand at Beginning of Reporting Period.....	1784857.51	
(c) Total Receipts (from Line 19) .....	384048.60	384048.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2168906.11	2168906.11
7. Total Disbursements (from Line 31).....	40886.08	40886.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2128020.03	2128020.03
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**National Rifle Association of America Political Victory Fund**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2019 To: M M / D D / Y Y Y Y 01 / 31 / 2019

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	41480.00	41480.00
(ii) Unitemized .....	340569.42	340569.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	382049.42	382049.42
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	382049.42	382049.42
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1999.18	1999.18
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	384048.60	384048.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	384048.60	384048.60

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3726.35	3726.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3726.35	3726.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31000.00	31000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	450.00	450.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	450.00	450.00
29. Other Disbursements (Including Non-Federal Donations).....	5709.73	5709.73
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	40886.08	40886.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40886.08	40886.08

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	382049.42	382049.42
34. Total Contribution Refunds (from Line 28(d)) .....	450.00	450.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	381599.42	381599.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3726.35	3726.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1999.18	1999.18
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1727.17	1727.17

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. PELTZER, J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 454**

City <b>THREE RIVERS</b>	State <b>CA</b>	Zip Code <b>93271-0454</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>PELTZEK GROVES</b>	Occupation (for Individual) <b>AG</b>
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		07		2019

**Transaction ID : 79394199**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

**B. MCCAFFETY, ONEIL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **5611 N STRAWBERRY LN**

City <b>CASTLE ROCK</b>	State <b>CO</b>	Zip Code <b>80108-9316</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>INFO REQUESTED</b>	Occupation (for Individual) <b>INFO REQUESTED</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2019

**Transaction ID : 79394293**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

**C. ROUNTREE, GRAHAM L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 382**

City <b>JUNEAU</b>	State <b>AK</b>	Zip Code <b>99802</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>ROUNDTREE, INC</b>	Occupation (for Individual) <b>SELF-EMPLOYED MERCHANT</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		30		2019

**Transaction ID : 79394332**

Amount of Each Receipt this Period  

1000.00
---------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. LENTZ, ADAM A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21190 SPARTA RD

City MILFORD	State VA	Zip Code 22514-2315
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		24		2019

**Transaction ID : 79394423**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. VOSS, ROBERT D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 513 CAPROCK CANYON TRL

City GEORGETOWN	State TX	Zip Code 78633-5476
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) CORP SECURITY DIRECTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		30		2019

**Transaction ID : 79394670**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. KNIGHT, WILLIAM G, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17907 EXCHANGE AVE

City LANSING	State IL	Zip Code 60438-2209
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		30		2019

**Transaction ID : 79394676**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. SANDLER, CRAIG D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 FIELDSTONE LN

City CANDIA	State NH	Zip Code 03034-2321
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NATIONAL RIFLE ASSOCIATION	Occupation (for Individual) RETIRED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2019

**Transaction ID : 79394784**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. WRIGHT, CHARLES R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2608 E 38TH ST

City COLUMBUS	State NE	Zip Code 68601-3860
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2019

**Transaction ID : 79394811**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. PARKER, ROBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9609

City CORPUS CHRISTI	State TX	Zip Code 78469-9609
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EMCOR INDUSTRIAL SERVICES	Occupation (for Individual) PRESIDENT
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2019

**Transaction ID : 79394842**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BURROWS, RONALD R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2275 OAK ST

City SALEM	State OH	Zip Code 44460-2519
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VARIOUS	Occupation (for Individual) PIPEFITTER
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2019

**Transaction ID : 79394928**

Amount of Each Receipt this Period  
400.00

Memo Item

**B. HULSEY, BRYCE D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 543 CARTER CREEK RD

City BOURBON	State MO	Zip Code 65441-6187
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

**Transaction ID : 79395052**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. JERNIGAN, ROSS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5115 PALMETTO POINT DR

City PALMETTO	State FL	Zip Code 34221-8793
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2019

**Transaction ID : 79395068**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. SMALLWOOD, PAT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1082  
 City TAVARES State FL Zip Code 32778-1082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SMALLWOOD SIGN COMPANY, INC. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : 79395160**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. NUNAN, TIM P, P, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5001 FRED MARSHALL RD  
 City RUSSELLVILLE State TN Zip Code 37860-8505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SHEPHERD  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : 79395412**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. BEAVER, GARY E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4193 SAN SABA PL  
 City BULLHEAD CITY State AZ Zip Code 86429-7733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 01 / 16 / 2019  
**Transaction ID : 79395621**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. THOMPSON, SPENCER E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1714 GREEN HILL DR

City HIXSON	State TN	Zip Code 37343-4901
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		28		2019

**Transaction ID : 79395700**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. MACIEJ, EDWARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6544 75TH PL

City MIDDLE VILLAGE	State NY	Zip Code 11379-1824
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MB REAL ESTATE	Occupation (for Individual) OPERATING ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2019

**Transaction ID : 79395832**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. PLOTT, CHRISTOPHER J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 730 PIMENTO AVE

City GRIFFIN	State GA	Zip Code 30224-8877
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) TRADER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		28		2019

**Transaction ID : 79396072**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. NORHEIM, EUGENE L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6869 97TH ST NE

City ROCKLAKE	State ND	Zip Code 58365-9623
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2019

**Transaction ID : 79396192**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. TATE, VICTOR B, , MR, II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4446 BANNOCK DR

City BOZEMAN	State MT	Zip Code 59715-9303
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	07	/	2019

**Transaction ID : 79396213**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. FORAN, CHARLES D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11815 MEADOWSPRING LN

City DALLAS	State TX	Zip Code 75218-1208
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AD	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2019

**Transaction ID : 79396240**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. GREEN, RICHARD R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16297 JACOBS RD

City WATERTOWN	State NY	Zip Code 13601-5455
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US ARMY	Occupation (for Individual) AUTO MECHANIC
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2019

**Transaction ID : 79396241**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. FILLMORE, JON P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 151

City ALBION	State ID	Zip Code 83311-0151
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2019

**Transaction ID : 79396277**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. CANNON, JAMES H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10310 W HIDDEN LAKE LN

City RICHMOND	State TX	Zip Code 77406-8766
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CANNON SERVICES LTD	Occupation (for Individual) MANAGER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2019

**Transaction ID : 79396320**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. MONROE, STEPHEN L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20846 FURR RD  
 City ROUND HILL State VA Zip Code 20141-1804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 28 / 2019  
**Transaction ID : 79396389**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. DEES, STEPHEN C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15327 TURNING TREE WAY  
 City CYPRESS State TX Zip Code 77433-4664  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : 79396461**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. LUEDTKE, NOEL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1101 14TH AVE NE  
 City ROCHESTER State MN Zip Code 55906-4373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IBM Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 24 / 2019  
**Transaction ID : 79396473**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. KNUTH, BRYAN H, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9425 RAVENNA RD  
 City CHARDON State OH Zip Code 44024-9161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) UNEMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : 79396610**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. WEBSTER, BILLIE M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 UNION AVE E  
 City WYNNE State AR Zip Code 72396-3037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED-MILITARY/FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : 79396641**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. STOLPA, JAMES, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2103 TEAKWOOD DR  
 City AUSTIN State TX Zip Code 78757-7750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSITY OF TEXAS - AUSTIN Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 01 / 16 / 2019  
**Transaction ID : 79396719**  
 Amount of Each Receipt this Period 365.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1115.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. ELLIS, MARK, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3466 BEAM DR  
 City LAS VEGAS State NV Zip Code 89139-5904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VA Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2019  
**Transaction ID : 79396768**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. LAWSON, VIRGIL L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3816 HILLSIDE TERRACE LN  
 City KNOXVILLE State TN Zip Code 37924-1058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 30 / 2019  
**Transaction ID : 79397052**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. HELM, J T, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 188 PERSIMMON LN  
 City ELIZABETHTOWN State PA Zip Code 17022-9527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) M & M MARS INC Occupation (for Individual) MECHANIC  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 28 / 2019  
**Transaction ID : 79397272**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. TITTLE, LANCE M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7961 KINGS HWY S

City ZIONSVILLE	State PA	Zip Code 18092-2557
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2019

**Transaction ID : 79397348**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. SIMCOE, TERENCE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 222 ROAD 3950

City FARMINGTON	State NM	Zip Code 87401-7983
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONOCO PHILLIPS CO.	Occupation (for Individual) LANDMAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2019

**Transaction ID : 79397446**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. ERWIN, KENNETH, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13980 LOCUST LN

City AVISTON	State IL	Zip Code 62216-3622
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

**Transaction ID : 79397614**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. DIEHL, WILLIAM H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 149 OMAR LN  
 City TYRONE State PA Zip Code 16686-6566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 FED GOVT USN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 29 / 2019  
**Transaction ID : 79397670**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. DULL, JERRY B, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4708 CORNELL DR  
 City BARTLESVILLE State OK Zip Code 74006-8513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2019  
**Transaction ID : 79397861**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. SCHOLAND, MIKE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16221 14TH ST NE  
 City BUXTON State ND Zip Code 58218-9317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 INFO REQUESTED MECHANIC  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 28 / 2019  
**Transaction ID : 79397919**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. FROST, GORDON T, , MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 919065

City SAN DIEGO	State CA	Zip Code 92191-9065
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

**Transaction ID : 79398007**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. BUERGE, SCOTT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 590

City NEVADA	State MO	Zip Code 64772-0590
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) METZ BANKING COMPANY	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2019

**Transaction ID : 79398091**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. GAYLEY, J W, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 ROBERTS RD

City BOWDOIN	State ME	Zip Code 04287-7541
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) YS NAVY RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

**Transaction ID : 79398109**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. WINDSOR, TODHUNTER, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 433 SHADOW RIDGE BLVD

City SHERIDAN	State WY	Zip Code 82801-9350
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) RETIRED RANCHER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2019

**Transaction ID : 79398128**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. BENTON, FRED, , MR, III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1065 ABERDEEN AVE

City BATON ROUGE	State LA	Zip Code 70808-3704
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MILDRED BENTON	Occupation (for Individual) ADMINISTRATIVE ASSISTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		28		2019

**Transaction ID : 79398204**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. SCHALLER, ROGER L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8210 LAKESHORE RD

City BURTCHVILLE	State MI	Zip Code 48059-1324
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SCHALLER CORP	Occupation (for Individual) MANAGER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		30		2019

**Transaction ID : 79398225**

Amount of Each Receipt this Period  
3000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BOSWELL, KEN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5804 WOODVIEW AVE  
 City AUSTIN State TX Zip Code 78756-1030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 08 / 2019  
**Transaction ID : 79398331**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

**B. MILAN, BILL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1258 E 2625 N  
 City OGDEN State UT Zip Code 84414-2615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : 79398451**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. GIESBRECHT, JUDITH, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 715 S MARIPOSA ST  
 City BURBANK State CA Zip Code 91506-3103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : 79398713**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	950.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 OF 47 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BOSANOZ, STEPHEN D, , MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5572 FOLKSTONE DR  
 City TROY State MI Zip Code 48085-3113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) PRINTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : 79398821**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. ANDREWS, WILLARD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2610 W RAINBOW DR  
 City CAMP VERDE State AZ Zip Code 86322-4900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CALIFORNIA INSTITUTE OF TECH Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : 79398854**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. KEMPE, WILLIAM E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 FRENETTE DR APT 3  
 City CHIPPEWA FLS State WI Zip Code 54729-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : 79398973**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. CARLSON, JEFF, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11263 CASCADA WAY

City SAN DIEGO	State CA	Zip Code 92124-2878
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		04		2019

**Transaction ID : 79399323**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. FRANKLIN, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9611 EDITH BLVD NE UNIT C

City ALBUQUERQUE	State NM	Zip Code 87113-2482
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2019

**Transaction ID : 79399384**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. MORTON, DICK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 216 VISTA ROBLES ST

City SAN ANTONIO	State TX	Zip Code 78232-1124
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2019

**Transaction ID : 79399488**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. GIRARDIN, PETER L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 693 HICKORY RD

City NAPLES	State FL	Zip Code 34108-2638
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2019

**Transaction ID : 79399944**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. AUGENSTEIN, SUE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2941 S YORK HWY

City JAMESTOWN	State TN	Zip Code 38556-5334
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2019

**Transaction ID : 79400013**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. MCGOUGH, BONNIE K, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 596

City FAIRFIELD	State ID	Zip Code 83327-0596
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) SCHOOL PSYCHOLOGIST
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2019

**Transaction ID : 79400058**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. CURRY, PATRICK J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 CALAVERA

City IRVINE	State CA	Zip Code 92606-8920
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2019

**Transaction ID : 79400101**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. SANDERS, SID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 850 SCHERMAN OAKS CIR

City CONWAY	State AR	Zip Code 72034-3498
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) AUDITOR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2019

**Transaction ID : 79400106**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. WOLFF, JAMES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24811 RIVER RD

City MARENGO	State IL	Zip Code 60152-9289
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2019

**Transaction ID : 79400174**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. WILSON, MICHAEL B, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16226 FELICIANA AVE  
 City PRAIRIEVILLE State LA Zip Code 70769-3056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARCHITECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : 79400276**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. CUNNINGHAM, GARY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12563 MALLARD RD  
 City SANGER State TX Zip Code 76266-3918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : 79400351**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. WEBBER, MICHAEL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7311 W HICKORY CREEK DR  
 City FRANKFORT State IL Zip Code 60423-9098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : 79400641**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. HALLACK, CHERIE A, , MISS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14353 CHAMBERLAIN DR

City VICTORVILLE	State CA	Zip Code 92394-3224
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEPT OF TRANSPORTATION	Occupation (for Individual) EQUIPMENT OPERATOR
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

**Transaction ID : 79400968**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. HARRIS, CONWAY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13221 HIGHWAY 1

City SHREVEPORT	State LA	Zip Code 71115-9432
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2019

**Transaction ID : 79400980**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. NICHOLAS, TANYA M, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 550 S POPLAR WAY

City DENVER	State CO	Zip Code 80224-1557
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

**Transaction ID : 79401063**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. HAHN, JIM, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 MAPLE WOOD DR

City BREWSTER	State NY	Zip Code 10509-5003
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	30	/	2019

**Transaction ID : 79401096**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. LARSEN, KENT M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 57112 SAND HILL LN

City AMES	State IA	Zip Code 50010-9366
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSTRUCT INC	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	16	/	2019

**Transaction ID : 79401171**

Amount of Each Receipt this Period  
365.00

Memo Item

**C. FECTEAU, MICHAEL A, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 615 HILL FARM RD

City COVENTRY	State RI	Zip Code 02816-4834
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CUSTOM BUILT WINDOW & DOOR SYS	Occupation (for Individual) FACTORY WORKER
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	30	/	2019

**Transaction ID : 79401274**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	915.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. ROBERTSON, CHARLES H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 MEADOW GLEN DR

City BRISTOL	State TN	Zip Code 37620-9519
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

**Transaction ID : 79401306**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. MOULDER, RODNEY G, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 126

City NURSERY	State TX	Zip Code 77976-0126
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ATZENHOFFER CHEVROLET COMPANY	Occupation (for Individual) DELIVERY DRIVER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2019

**Transaction ID : 79401413**

Amount of Each Receipt this Period  
400.00

Memo Item

**C. PORTER, ROBERT E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6815 N 21ST ST

City PHOENIX	State AZ	Zip Code 85016-1105
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2019

**Transaction ID : 79401442**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1400.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 47  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. GIESECKE, NOEL, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5010 CRAWFORD ST  
 City HOUSTON State TX Zip Code 77004-5735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : 79401446**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. LEONARD, STEPHEN D, , DR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3704 E ALTA RIDGE CT  
 City BOISE State ID Zip Code 83716-7122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 28 / 2019  
**Transaction ID : 79401577**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. WEEDEN, JAMES E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 334 N PIERCE ST  
 City DELPHOS State OH Zip Code 45833-1527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : 79401607**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. O'CONNOR, WILLIAM P, , II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31738 468TH AVE

City BURBANK	State SD	Zip Code 57010-7021
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) WELDER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2019

**Transaction ID : 79401626**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. POE, TERRY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2170

City YUCCA VALLEY	State CA	Zip Code 92286-2170
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2019

**Transaction ID : 79401670**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. MILLSAP, JAMES E, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 79466 ROAD 447

City BERWYN	State NE	Zip Code 68814-5193
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2019

**Transaction ID : 79401671**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. SMITH, TIMOTHY J, , SR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2728 S PARK AVE  
 City BELOIT State WI Zip Code 53511-2134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) LOGISTICS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 20 / 2019  
**Transaction ID : 79401821**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. PARKER, HOYT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5297 COOSA COUNTY ROAD 49  
 City GOODWATER State AL Zip Code 35072-7111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : 79401846**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. ANDERSON, TED, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 98  
 City FRAZEE State MN Zip Code 56544-0098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANDERSON BUS AND COACH Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 28 / 2019  
**Transaction ID : 79401859**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BEARD, JAMES, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3816 OLIVER AVE  
 City ANNANDALE State VA Zip Code 22003-1719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED - ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 29 / 2019  
**Transaction ID : 79401950**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. GARDNER, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1434 RIVER FRONT DR  
 City CHARLESTON State SC Zip Code 29407-3610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 28 / 2019  
**Transaction ID : 79401993**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. PETERSON, BRIAN D, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 N HAMPTON DR  
 City DAVENPORT State FL Zip Code 33897-5304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSAL RESORT SECURITY Occupation (for Individual) SECURITY OFFICER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 31 / 2019  
**Transaction ID : 79402047**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BACH, CHRISTINE, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1495 SAUTERN DR

City FORT MYERS	State FL	Zip Code 33919-2730
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		30		2019

**Transaction ID : 79402086**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. ONYON, JOHN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3049 STATE ROUTE 848

City NEW MILFORD	State PA	Zip Code 18834-7844
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		29		2019

**Transaction ID : 79402304**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. NAKAYAMA, FRANK S, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 MUMFORD AVE

City LONGMONT	State CO	Zip Code 80501-1106
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) SERVICE REP
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		28		2019

**Transaction ID : 79402313**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 OF 47
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. CABALFIN, EDWIN V, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2609 TRENTON AVE

City BREMERTON	State WA	Zip Code 98310-5237
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) POLICE OFFICER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2019

**Transaction ID : 79402635**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. DUNN, RANDOLPH A, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5207 NE 276TH AVE

City CAMAS	State WA	Zip Code 98607-8767
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED	Occupation (for Individual) INFO REQUESTED
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2019

**Transaction ID : 79402636**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. BROBERG, DAVE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 902 SW 60TH ST

City LAWTON	State OK	Zip Code 73505-7723
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WFEC-ANADARKO. OK	Occupation (for Individual) MAINTENANCE/EDI TECH.
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2019

**Transaction ID : 79402887**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. LOUGHRIDGE, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 S SPIRIT HOLW  
 City PAYSON State AZ Zip Code 85541-5931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 29 / 2019  
**Transaction ID : 79402903**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. SINCLAIR, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 SE 302ND AVE  
 City OLD TOWN State FL Zip Code 32680-4510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 30 / 2019  
**Transaction ID : 79403166**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. FIELDS, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8025 MARYLAND AVE UNIT 13C  
 City SAINT LOUIS State MO Zip Code 63105-3892  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) NONE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2019  
**Transaction ID : 79403263**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BASDEN, MICHAEL D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 403

City LECANTO State FL Zip Code 34460-0403

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) RETIRED OVER THE ROAD TRUC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 30 / 2019

**Transaction ID : 79403270**

Amount of Each Receipt this Period 500.00

Memo Item

**B. LEVEN, STEPHEN H, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6841 VIRGINIA PKWY STE 103

City MCKINNEY State TX Zip Code 75071-5716

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2019

**Transaction ID : 79403452**

Amount of Each Receipt this Period 250.00

Memo Item

**C. WERN, MIKE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13435 W REGAN RD

City MOKENA State IL Zip Code 60448-9621

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENGINEERED ABRASIVES Occupation (for Individual) PRESIDENT

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 31 / 2019

**Transaction ID : 79403515**

Amount of Each Receipt this Period 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A. BANE, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6758 E ARDEN CT  
 City PRESCOTT VALLEY State AZ Zip Code 86314-6703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 29 / 2019  
**Transaction ID : 79403521**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. GUINARD, EDWARD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 STONEHEDGE DR  
 City STOCKHOLM State NJ Zip Code 07460-1100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2019  
**Transaction ID : 79403529**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. ROGERS, LANGDON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5860 E HIGHWAY 20 APT 4  
 City LUCERNE State CA Zip Code 95458-8542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 30 / 2019  
**Transaction ID : 79403648**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 47  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**CRIM, EDWARD, , ,**

Mailing Address **PO BOX 1000**

City <b>STEVENSVILLE</b>	State <b>MD</b>	Zip Code <b>21666-1000</b>
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>INFO REQUESTED</b>	Occupation (for Individual) <b>INFO REQUESTED</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		29		2019

**Transaction ID : 79403652**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period  

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 Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period  

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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>41480.00</b>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 47  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	--	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Master Print, Inc.**

Mailing Address P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1997.73

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	11	/	2019

**Transaction ID : 79218312**

Amount of Each Receipt this Period  
1997.73

Memo Item

Vendor Refund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1997.73
<b>TOTAL</b> This Period (last page this line number only).....▶	1997.73



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. National Rifle Association of America**

Mailing Address 11250 Waples Mill Road

City  
Fairfax

State  
VA

Zip Code  
22030

Purpose of Disbursement  
Website Hosting/Service Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 79330908**

Amount of Each Disbursement this Period

Website Hosting/Service Fee

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wells Fargo Bank, N.A.**

Mailing Address 1300 Chain Bridge Road

City  
McLean

State  
VA

Zip Code  
22101

Purpose of Disbursement  
Account Analysis Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 79357206**

Amount of Each Disbursement this Period

Account Analysis Fee

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wells Fargo Bank, N.A.**

Mailing Address 1300 Chain Bridge Road

City  
McLean

State  
VA

Zip Code  
22101

Purpose of Disbursement  
Account Analysis Fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 79357207**

Amount of Each Disbursement this Period

Account Analysis Fee

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. PAYMENTECH, INC.**

Mailing Address 4 NORTHEASTERN BLVD

City  
SALEM

State  
NH

Zip Code  
03079

Purpose of Disbursement  
Credit Card Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 79366007**

Amount of Each Disbursement this Period

Credit Card Fees

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Mike Kelly For Congress**

Mailing Address PO Box 476

City  
Lyndora

State  
PA

Zip Code  
16045

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Kelly, Mike, , Rep.,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2020

Primary  General  
 Other (specify) ▼

State: PA District: 16

Date of Disbursement

MM / DD / YYYY  
01 / 11 / 2019

FEC Identification Number

C C00474189

**Transaction ID : 79212777**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 First Street SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 26 / 2019

FEC Identification Number

C C00075820

**Transaction ID : 79278898**

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. NRSC**

Mailing Address 425 2nd Street, NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 30 / 2019

FEC Identification Number

C C00027466

**Transaction ID : 79325439**

Amount of Each Disbursement this Period

15000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

31000.00

**TOTAL** This Period (last page this line number only)..... ▶

31000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. RICHARDSON, CAROL, , ,**

Mailing Address PO BOX 583

City  
RIVERTON

State  
WY

Zip Code  
82501-0079

Purpose of Disbursement  
Contribution Refund

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 79180433**  
Amount of Each Disbursement this Period

Memo Item  
Contribution Refund

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

### A. Friends of Nick Kipke

Mailing Address 191 Main Street  
Ste. 310

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
Nicholaus Kipke, STATE HOUSE 31st MD

Category/  
Type

Candidate Name  
**Kipke, Nicholaus, , MD Del.,**

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	9

FEC Identification Number  
  
**Transaction ID : 79180329**  
 Amount of Each Disbursement this Period  
  
 Memo Item Nicholaus Kipke, STATE HOUSE 31st MD

Full Name (Last, First, Middle Initial)

### B. Friends of Kathy Szeliga

Mailing Address 191 Main Street  
Ste. 310

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
Kathy Szeliga, STATE HOUSE 7th MD

Category/  
Type

Candidate Name  
**Szeliga, Kathy, , MD Del.,**

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	9

FEC Identification Number  
  
**Transaction ID : 79180333**  
 Amount of Each Disbursement this Period  
  
 Memo Item Kathy Szeliga, STATE HOUSE 7th MD

Full Name (Last, First, Middle Initial)

### C. Colonial Leadership Trust PAC

Mailing Address P.O. Box 71596

City Henrico State VA Zip Code 23225

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	1	9

FEC Identification Number  
  
**Transaction ID : 79180335**  
 Amount of Each Disbursement this Period  
  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**National Rifle Association of America Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Majority Leader PAC**

Mailing Address PO Box 309

City  
Woodstock

State  
VA

Zip Code  
22664

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2019

FEC Identification Number

C [ ]

**Transaction ID : 79180386**

Amount of Each Disbursement this Period

[ ] 1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Prolist Inc.**

Mailing Address 4510 Buckeystown Pike, Suite M

City  
Frederick

State  
MD

Zip Code  
21704-7539

Purpose of Disbursement  
IE - Direct Mail Expense

004

Category/  
Type

Candidate Name

**Campbell, Ronnie, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2019

FEC Identification Number

C [ ]

**Transaction ID : 79180530**

Amount of Each Disbursement this Period

[ ] 2109.73

IE - Direct Mail Expense

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[ ]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[ ] 3609.73

**TOTAL** This Period (last page this line number only)..... ▶

[ ] 5609.73

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 47 OF 47
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Rifle Association of America Political Victory Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Prolist Inc.</b>		Nature of Debt (Purpose): Direct Mail Expense	
Mailing Address 4510 Buckeystown Pike Suite M			
City Frederick	State MD	Zip Code 21704-7539	

Outstanding Balance Beginning This Period 2109.73		Transaction ID : 79438230	
Amount Incurred This Period 0.00	Payment This Period 2109.73	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	0.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	